

Application Data Sheet

Application Information

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| Application Type:: | Regular |
| Subject Matter:: | Utility |
| Suggested Group Art Unit:: | N/A |
| CD-ROM or CD-R?:: | None |
| Sequence submission?:: | None |
| Computer Readable Form (CRF)?:: | No |
| Title:: | BLOCK DATA MIGRATION |
| Attorney Docket Number:: | EQLC-P01-003 |
| Request for Early Publication?:: | No |
| Request for Non-Publication?:: | No |
| Suggested Drawing Figure:: | 1 |
| Total Drawing Sheets:: | 9 |
| Small Entity?:: | Yes |
| Petition included?:: | No |
| Secrecy Order in Parent Appl.?:: | No |

Applicant Information

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| Applicant Authority Type:: | Inventor |
| Primary Citizenship Country:: | US |
| Status:: | Full Capacity |
| Given Name:: | G. |
| Middle Name:: | Paul |
| Family Name:: | Koning |
| City of Residence:: | Nashua |
| State or Province of Residence:: | NH |
| Country of Residence:: | US |
| Street of mailing address:: | 408 Joe English Road |
| City of mailing address:: | New Boston |
| State or Province of mailing address:: | NH |

Postal or Zip Code of mailing address:: 03070

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Peter
Middle Name:: C.
Family Name:: Hayden
City of Residence:: Mount Vernon
State or Province of Residence:: NH
Country of Residence:: US
Street of mailing address:: 17 Purgatory Road
City of mailing address:: Mount Vernon
State or Province of mailing address:: NH
Postal or Zip Code of mailing address:: 03057

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Paula
Family Name:: Long
City of Residence:: Hollis
State or Province of Residence:: NH
Country of Residence:: US
Street of mailing address:: 25 Winchester Drive
City of mailing address:: Hollis
State or Province of mailing address:: NH
Postal or Zip Code of mailing address:: 03049

Correspondence Information

Correspondence Customer Number:: 28120

Representative Information

Representative Customer Number:: 28120

Domestic Priority Information

| Application:: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|------------------|---|----------------------|----------------------|
| This Application | An application claiming the benefit under 35 USC 119(e) | 60/441810 | 01/21/03 |

Assignee Information

Assignee name:: EQUALLOGIC INC.
Street of mailing address:: 9 Townsend West
City of mailing address:: Nashua
State or Province of mailing address:: NH
Postal or Zip Code of mailing address:: 03063